

**State Controller's Office  
Division of Accounting and Reporting  
Apportionment Payment Applied to State Mandated Claims  
Claimant's Account Summary  
As of December 01, 2012**

**Claimant Name:** DESERT CENTER UNIFIED SCHOOL DISTRICT

**Apportionment Amount:** \$ 589

(A) Program Name	(B) Program Number	(C) Legal Reference	(D) Fiscal Year	(E) Claim Offset	(F) Accrued Interest Offset	(G) Apportionment Offset (E)+(F)
Comprehensive School Safety Plans	223	Ch. 736/97	20052006	\$ 589	\$ -	\$ 589
<b>Desert Center Unified School District Total</b>				<b>\$ 589</b>	<b>\$ -</b>	<b>\$ 589</b>